

County: Jefferson
WILLOWBROOK NURSING & REHABILITATION CENTER
901 MULBERRY STREET

Facility ID: 9440

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LAKE MILLS 53551 Phone: (920) 648-8344
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 56
Total Licensed Bed Capacity (12/31/01): 56
Number of Residents on 12/31/01: 51

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 51

Corporation
Skilled
No
Yes
Yes
51

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis	%	Age Groups	%				%
Home Health Care	No					Less Than 1 Year		37.3	
Supp. Home Care-Personal Care	No					1 - 4 Years		49.0	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.8	More Than 4 Years		13.7	
Day Services	No	Mental Illness (Org./Psy)	3.9	65 - 74	9.8				
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	21.6			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.1	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	15.7	Full-Time Equivalent			
Congregate Meals	Yes	Cancer	0.0			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	11.8		100.0	(12/31/01)			
Other Meals	No	Cardiovascular	11.8	65 & Over	92.2				
Transportation	No	Cerebrovascular	9.8			RNs		12.5	
Referral Service	No	Diabetes	7.8	Sex	%	LPNs		9.9	
Other Services	Yes	Respiratory	3.9			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	51.0	Male	25.5	Aides, & Orderlies			
Mentally Ill	No			Female	74.5				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

Method of Reimbursement

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Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay			Family Care			Managed Care					
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	3	9.1	120	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	5.9
Skilled Care	4	100.0	174	27	81.8	102	4	100.0	201	7	70.0	174	0	0.0	0	0	0.0	0	42	82.4
Intermediate	---	---	---	3	9.1	85	0	0.0	0	3	30.0	168	0	0.0	0	0	0.0	0	6	11.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		33	100.0		4	100.0		10	100.0		0	0.0		0	0.0		51	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				

Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	5.4	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	0.0	Bathing	0.0	37.3	62.7	51
Other Nursing Homes	2.7	Dressing	7.8	39.2	52.9	51
Acute Care Hospitals	90.5	Transferring	33.3	49.0	17.6	51
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	35.3	41.2	23.5	51
Rehabilitation Hospitals	0.0	Eating	37.3	41.2	21.6	51
Other Locations	1.4	*****				
Total Number of Admissions	74	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	7.8	Receiving Respiratory Care		7.8
Private Home/No Home Health	35.6	Occ/Freq. Incontinent of Bladder	51.0	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	8.2	Occ/Freq. Incontinent of Bowel	39.2	Receiving Suctioning		0.0
Other Nursing Homes	4.1			Receiving Ostomy Care		0.0
Acute Care Hospitals	16.4	Mobility		Receiving Tube Feeding		5.9
Psych. Hosp. -MR/DD Facilities	2.7	Physically Restrained	2.0	Receiving Mechanically Altered Diets		33.3
Rehabilitation Hospitals	0.0					
Other Locations	11.0	Skin Care		Other Resident Characteristics		
Deaths	21.9	With Pressure Sores	0.0	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	2.0	Medications		
(Including Deaths)	73			Receiving Psychoactive Drugs		43.1

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities %	Ratio			
Occupancy Rate: Average Daily Census/Licensed Beds	91.1	82.5	1.10	86.4	1.05	85.8	1.06	84.6	1.08
Current Residents from In-County	84.3	74.3	1.14	69.6	1.21	69.4	1.21	77.0	1.10
Admissions from In-County, Still Residing	20.3	19.8	1.02	19.9	1.02	23.1	0.88	20.8	0.97
Admissions/Average Daily Census	145.1	148.2	0.98	133.4	1.09	105.6	1.37	128.9	1.13
Discharges/Average Daily Census	143.1	146.6	0.98	132.0	1.08	105.9	1.35	130.0	1.10
Discharges To Private Residence/Average Daily Census	62.7	58.2	1.08	49.7	1.26	38.5	1.63	52.8	1.19
Residents Receiving Skilled Care	88.2	92.6	0.95	90.0	0.98	89.9	0.98	85.3	1.03
Residents Aged 65 and Older	92.2	95.1	0.97	94.7	0.97	93.3	0.99	87.5	1.05
Title 19 (Medicaid) Funded Residents	64.7	66.0	0.98	68.8	0.94	69.9	0.93	68.7	0.94
Private Pay Funded Residents	19.6	22.2	0.88	23.6	0.83	22.2	0.88	22.0	0.89
Developmentally Disabled Residents	0.0	0.8	0.00	1.0	0.00	0.8	0.00	7.6	0.00
Mentally Ill Residents	3.9	31.4	0.12	36.3	0.11	38.5	0.10	33.8	0.12
General Medical Service Residents	51.0	23.8	2.14	21.1	2.42	21.2	2.40	19.4	2.63
Impaired ADL (Mean)	57.3	46.9	1.22	47.1	1.22	46.4	1.23	49.3	1.16
Psychological Problems	43.1	47.2	0.91	49.5	0.87	52.6	0.82	51.9	0.83
Nursing Care Required (Mean)	6.1	6.7	0.92	6.7	0.91	7.4	0.82	7.3	0.84